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SERIAL NUMBER: 09 / 856727 RECEIPT DATE: 05 / 25 / 01  
IA NUMBER: PCT/ JP00 / 06499 IA FILING DATE: 09 / 22 / 00  
FAMILY NAME: YAMAGUCHI DELAY WAIVED (Y/N): N  
GIVEN NAME: KENTOKU DEMAND RECEIVED (Y/N): Y  
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NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N  
ATTORNEY DOCKET NUMBER: 04329.2571 COUNTRY:  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000  
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APPLICATION TITLES:  
RADIO COMMUNICATION TERMINAL

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CONFIRMATION NO. 3367

Bib Data Sheet

SERIAL NUMBER 09/856,727	FILING DATE 05/25/2001 RULE	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. 04329.2571
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## APPLICANTS

Kentoku Yamaguchi, Tokyo, JAPAN;

## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLICATION IS A 371 OF PCT/JP00/06499 09/22/2000 *M*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

JAPAN 11-275516 09/29/1999 *BS*

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 6	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>BS</i>				
Verified and Acknowledged Examiner's Signature <i>BS</i> Initials				

## ADDRESS

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## TITLE

Radio communication terminal

FILING FEE RECEIVED 860	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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